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4191-02-U

SOCIAL SECURITY ADMINISTRATION

[Docket No: SSA-2018-0072]

Agency Information Collection Activities: Proposed Request and Comment Request

The Social Security Administration (SSA) publishes a list of information collection

packages requiring clearance by the Office of Management and Budget (OMB) in

compliance with Public Law 104-13, the Paperwork Reduction Act of 1995, effective

October 1, 1995. This notice includes revisions of OMB-approved information

collections, and one new information collection.

SSA is soliciting comments on the accuracy of the agency's burden estimate; the need for

the information; its practical utility; ways to enhance its quality, utility, and clarity; and

ways to minimize burden on respondents, including the use of automated collection

techniques or other forms of information technology. Mail, email, or fax your comments

and recommendations on the information collection(s) to the OMB Desk Officer and SSA

Reports Clearance Officer at the following addresses or fax numbers.

(OMB)

Office of Management and Budget

Attn: Desk Officer for SSA

Fax: 202-395-6974

Email address: OIRA_Submission@omb.eop.gov

(SSA)

Social Security Administration, OLCA

Attn: Reports Clearance Director

3100 West High Rise

6401 Security Blvd.

Baltimore, MD 21235

Fax: 410-966-2830

Email address: OR.Reports.Clearance@ssa.gov

Or you may submit your comments online through www.regulations.gov, referencing Docket ID Number [SSA-2018-0072].

- I. The information collections below are pending at SSA. SSA will submit them to OMB within 60 days from the date of this notice. To be sure we consider your comments, we must receive them no later than [INSERT DATE 60 DAYS AFTER DATE OF PUBLICATION IN THE FEDERAL REGISTER]. Individuals can obtain copies of the collection instruments by writing to the above email address.
 - 1. Tribal Council Coverage Agreement -- 0960-NEW. Section 218A of the Social Security Act (Act) grants voluntary Social Security coverage to Indian tribal council members. The coverage is voluntary for tribal council members; however, if the tribe wishes to obtain Social Security coverage, they must complete the agreement. Each tribe requesting coverage fills out one agreement. SSA employees collect this information via the paper

form. The respondents are Indian tribal councils who wish to receive Social Security coverage for their members.

Type of Request: Request for a new information collection.

Modality of Completion	Number of Respondents	Frequency of Response	Average Burden Per Response (minutes)	Estimated Total Annual Burden (hours)
Tribal Council Coverage	100	1	10	17
Agreement Form				

2. Request to be Selected as a Payee -- 20 CFR 404.2010-404.2055,

416.601-416.665 -- 0960-0014. SSA requires an individual applying to be a representative payee for a Social Security beneficiary or Supplemental Security Income (SSI) recipient to complete Form SSA-11-BK, or supply the same information to a field office technician through a personal ingerview. SSA obtains information from applicant payees regarding their relationship to the beneficiary; personal qualifications; concern for the beneficiary's well-being; and intended use of benefits if appointed as payee. The respondents are individuals; private sector businesses and institutions; and State and local government institutions and agencies applying to become representative payees.

Type of Request: Revision of an OMB approved information collection.

Individuals/Households (90%)

Modality of Completion	Number of Respondents	Frequency of	Average Burden Per	Estimated Total
		Response	Response (minutes)	Annual Burden
				(hours)

Representative	1,710,000	1	12	342,000
Payee System				
(RPS)				
Paper Version	68,400	1	12	13,680
Total	1,778,400			355,680

Private Sector (9%)

Modality of Completion	Number of Respondents	Frequency of Response	Average Burden Per Response (minutes)	Estimated Total Annual Burden (hours)
Representative Payee System (RPS)	171,000	1	12	34,200
Paper Version	6,840	1	12	1,368
Total	177,840			35,568

State/Local/Tribal Government (1%)

Modality of Completion	Number of Respondents	Frequency of Response	Average Burden Per Response (minutes)	Estimated Total Annual Burden (hours)
Representative Payee System (RPS)	19,000	1	12	3,800
Paper Version	340	1	12	68
Total	19,340			3,868

(Grand Total	1,975,580		395,116

3. Statement for Determining Continuing Eligibility for Supplemental

Security Income Payment -- 20 CFR 416.204 -- 0960-0145. SSA uses

Form SSA-8202-BK to conduct low and middle-error profile (LEP/MEP)

telephone, or face-to-face redetermination interviews with SSI recipients

and representative payees, if applicable. SSA conducts LEP

redeterminations interviews on a 6-year cycle, and MEP redeterminations

annually. SSA requires the information we collect during the interview to

determine whether: (1) SSI recipients met, and continue to meet, all statutory and regulatory requirements for SSI eligibility; and (2) the SSI recipients received, and are still receiving, the correct payment amounts. This information includes non-medical eligibility factors such as income, resources, and living arrangements. To complete Form SSA-8202, the respondents may need to obtain information from employers or financial institutions. The respondents are SSI recipients and their representatives, if applicable.

Type of Request: Revision of an OMB approved information collection.

Modality of Completion	Number of Respondents	Frequency of Response	Average Burden Per Response (minutes)	Estimated Total Annual Burden (hours)
SSA-8202-	9,954	1	21	3,484
BK				
SSI Claims	2,021,883	1	20	673,944
System				
Totals	2,031,787			677,428

4. Internet Direct Deposit Application -- 31 CFR Part 210 -- 0960-0634.

SSA requires all applicants and recipients of Social Security Old Age,
Survivors, and Disability Insurance (OASDI) benefits, or SSI payments, to
receive these benefits and payments via direct deposit at a financial
institution. SSA receives Direct Deposit/Electronic Funds Transfer
(DD/EFT) enrollment information from OASDI beneficiaries and SSI
recipients to facilitate DD/EFT of their funds with their chosen financial
institution. We also use this information when an enrolled individual

wishes to change their DD/EFT information. For the convenience of the respondents, we collect this information through several modalities, including an Internet application; in-office or telephone interviews; and our automated telephone system. In addition to using the direct deposit information to enable DD/EFT of funds to the recipient's chosen financial institution, we also use the information through our Direct Deposit Fraud Indicator to ensure the correct recipient receives the funds. Respondents are OASDI beneficiaries and SSI recipients requesting that we enroll them in the Direct Deposit program, or change their direct deposit banking information.

Type of Request: Revision of an OMB-approved information collection.

		Modality of	Number of	Frequency of	Average	Estimated
		Completion	Respondents	Response	Burden Per	Annual Burden
					Response	(hours)
II.					(minutes)	
11.		Internet DD	432,482	1	10	72,080
	S	Non-Electronic	3,227,426	1	12	645,485
	S	Services				
	S	(FO, 800#-				
	S	ePath, SSI				
	A	Claims				
	А	System, SPS,				
		MACADE,				
		POS, RPS)				
	S	Direct Deposit	33,238	1	2	1,108
	3	Fraud Indicator				
	11	Totals	3,693,146			718,673

bmitted the information collections below to OMB for clearance. Your comments regarding these information collections would be most useful if OMB and SSA receive them 30 days from the date of this publication. To be

sure we consider your comments, we must receive them no later than

[INSERT DATE 30 DAYS AFTER DATE OF PUBLICATION IN THE

FEDERAL REGISTER]. Individuals can obtain copies of the OMB

clearance packages by writing to OR.Reports.Clearance@ssa.gov.

1. Certificate of Responsibility for Welfare and Care of Child Not in Applicant's Custody -- 20 CFR 404.330, 404.339-404.341 and 404.348-404.349 -- 0960-0019. SSA uses Form SSA-781 to determine if non-custodial parents who file for spouse, mother's, father's, or surviving divorced mother's or father's benefits based on having a child in their care meet the in-care requirements. The in-care provision requires claimants to have an entitled child under age 16 or disabled in their care. The respondents are applicants for spouse, mother's, father's, or surviving divorced mother or father Social Security benefits.

Type of Request: Revision of an OMB-approved information collection.

Modality of	Number of	Frequency	Average	Estimated
Completion	Respondents	of Response	Burden	Total Annual
			Per	Burden
			Response	(hours)
			(minutes)	
SSA-781	14,000	1	10	2,333

2. Farm Self-Employment Questionnaire -- 20 CFR 404.1082(c) & 404.1095 -- 0960-0061. SSA collects the information on Form SSA-7156 on a voluntary and as-needed basis to determine the existence of an agriculture trade or business which may affect the monthly benefit, or insured status, of the applicant. SSA requires the existence of a trade or

business before determining if an individual or partnership has net earnings from self-employment. When an applicant indicates self-employment as a farmer, SSA uses the SSA-7165 to obtain the information we need to determine the existence of an agricultural trade or business, and subsequent covered earnings for Social Security entitlement purposes. As part of the application process, we conduct a personal interview, either face-to-face or via telephone, and document the interview using Form SSA-7165. We also allow applicants to complete a fillable version of the form available on our website, which they can complete, print, and sign. The respondents are applicants for Social Security benefits whose entitlement depends on whether the worker received covered earnings from self-employment as a farmer.

Type of Request: Revision of an OMB-approved information collection.

Modality of Completion	Number of Responses	Frequency of Response	Average Burden Per Response (minutes)	Estimated Total Annual Burden (hours)
SSA-7156	47,500	1	10	7,917

3. Child Relationship Statement -- 20 CFR 404.355 & 404.731 --

0960-0116. To help determine a child's entitlement to Social Security benefits, SSA uses criteria under section 216(h)(3) of the Act, deemed child provision. SSA may deem a child to an insured individual if: (1) the insured individual presents SSA with satisfactory evidence of parenthood, and was living with or contributing to the child's support at certain specified times; or (2) the insured individual: (a) acknowledged the child

in writing; (b) was court decreed as the child's parent; or (c) was court ordered to support the child. To obtain this information, SSA uses Form SSA-2519, Child Relationship Statement. The respondents are people with knowledge of the relationship between certain individuals filing for Social Security benefits and their alleged biological children.

Type of Request: Revision of an OMB-approved information collection.

Modality of	Number of	Frequency	Average	Estimated
Completion	Respondents	of Response	Burden	Total Annual
_	_	_	Per	Burden (hours)
			Response	
			(minutes)	
SSA-2519	50,000	1	15	12,500

4. Pre-1957 Military Service Federal Benefit Questionnaire -- 20 CFR 404.1301 -404.1371 -- 0960-0120. SSA may grant gratuitous military wage credits for active military or naval service (under certain conditions) during the period September 16, 1940 through December 31, 1956, if no other Federal agency (other than the Veterans Administration) credited the service for benefit eligibility or computation purposes. We use Form SSA-2512 to collect specific information about other Federal, military, or civilian benefits the wage earner may receive when the applicant indicates both pre-1957 military service and the receipt of a Federal benefit. SSA uses the data in the claims adjudication process to grant gratuitous military wage credits when applicable, and to solicit sufficient information to determine eligibility. Respondents are applicants for Social Security

benefits on a record where the wage earner claims pre-1957 military service.

Type of Request: Revision of an OMB-approved information collection.

Modality of Completion	Number of Respondents	Frequency of Response	Average Burden Per Response (minutes)	Estimated Total Annual Burden (hours)
SSA-2512	5,000	1	10	833

5. Authorization for the Social Security Administration to Obtain Account Records from a Financial Institution -- 20 CFR 416.200, 416.203, 404.508, & 416.553 -- 0960-0293. SSA collects and verifies financial information from individuals applying for Title II and Title XVI waiver determinations, as well as those who apply for, or currently receive (in the case of redetermination), SSI payments. We require the financial information from these applicants to: (1) determine the eligibility of the applicant or recipient for SSI benefits; or (2) determine if a request to waive a Social Security overpayment defeats the purpose of the Act. If the Title II and Title XVI waiver applicants, or the SSI claimants, provide incomplete, unavailable, or seemingly altered records, SSA contacts their financial institutions to verify the existence, ownership, and value of accounts owned. Financial institutions need individuals to sign Form SSA-4641-F4, or work with SSA staff to complete one of SSA's electronic applications, e4641 or the Access to Financial Institutions (AFI) screens, to authorize the individual's financial institution to disclose records to SSA.

The respondents are Title II and Title XVI recipients applying for waivers, or SSI applicants, recipients, and their deemors to determine SSI eligibility. Type of Request: Revision of an OMB-approved information collection.

Modality of Completion	Number of Respondents	Frequency of Response	Average Burden Per Response (minutes)	Estimated Total Annual Burden (hours)
SSA-4641 (paper)	140,000	1	6	14,000
e4641 and AFI (Internet)	15,860,000	1	2	528,667
Totals	16,000,000			542,667

6. Vocational Rehabilitation Provider Claim -- 20 CFR 404.2108(b), 404.2117(c)(1)&(2), 404.2101(b)&(c), 404.2121(a), 416.2208(b), 416.2217(c)(1) & (2), 416.2201(b)&(c), 416.2221(a) -- 0960-0310. State vocational rehabilitation (VR) agencies submit Form SSA-199 to SSA to obtain reimbursement of costs incurred for providing VR services. SSA requires state VR agencies to submit reimbursement claims for the following categories: (1) claiming reimbursement for VR services provided; (2) certifying adherence to cost containment policies and procedures; and (3) preparing causality statements. The respondents provide the information requested through a web-based Secure Ticket Portal, in lieu of submitting forms. This Portal allows VRs to retrieve reports, and enter and submit information electronically, minimizing the use of the paper form to SSA for consideration and approval of the claim for reimbursement of costs incurred for SSA beneficiaries. SSA uses the

information on the SSA-199, along with the written documentation, to determine whether, and how much, to pay State VR agencies under SSA's VR program. Respondents are State VR agencies offering vocational and employment services to Social Security and SSI recipients.

Type of Request: Revision of an OMB-approved information collection.

Modality of Completion (type of response as indicated below)	Number of Respondents	Frequency of Response	Number of Respons es	Average Burden Per Respons e (minutes)	Estimated Total Annual Burden (hours)
SSA-199 CFR 404.2108 & 416.2208	80	160	12,800	23	4,907
CFR 404.2117 & 416.2217 Written requests	80	1	80	60	80
CFR 404.2121 & 416.2221 Written requests	80	2.5	200	100	333
Total	80		13,080		5,320

7. Response to Notice of Revised Determination -- 20 CFR

404.913-404.914, 404.992(b), 416.1413-416.1414, and 416.1492(d) --

0960-0347. When SSA determines: (1) claimants for initial disability benefits do not actually have a disability; or (2) current disability recipients' records show their disability ceased, SSA notifies the disability claimants, or recipients of this decision. In response to this notice, the

affected claimants and disability recipients have the following recourse:

(1) they may request a disability hearing to contest SSA's decision; and (2) they may submit additional information or evidence for SSA to consider. Disability claimants, recipients, and their representatives use Form SSA-765 to accomplish these two actions. If respondents request the first option, SSA's Disability Hearings Unit uses the form to schedule a hearing; ensure an interpreter is present, if required; and ensure the disability recipients or claimants, and their representatives, receive a notice about the place and time of the hearing. If respondents choose the second option, SSA uses the form and other evidence to reevaluate the claimant's or recipients' case, and determine if the new information or evidence will change SSA's decision. The respondents are disability claimants, current disability recipients, or their representatives.

Type of Request: Revision of an OMB-approved information collection.

Modality of Completion	Number of Respondents	Frequency of Response	Average Burden	Estimated Total Annual
			Per Response (minutes)	Burden (hours)
SSA-765	1,925	1	30	963

8. Request for Change in Time/Place of Disability Hearing -- 20 CFR 404.914(c)(2) and 416.1414(c)(2) -- 0960-0348. At the request of the claimants or their representatives, SSA schedules evidentiary hearings at the reconsideration level for claimants of Title II benefits or Title XVI payments when we deny their claims for disability. When claimants or

their representatives find they are unable to attend the scheduled hearing, they complete Form SSA-769 to request a change in time or place of the hearing. SSA uses the information as a basis for granting or denying requests for changes and for rescheduling disability hearings. Respondents are claimants or their representatives who wish to request a change in the time or place of their hearing.

Type of Request: Revision of an OMB-approved information collection.

Modality of Completion	Number of Respondents	Frequency of Response	Average Burden Per Response (minutes)	Estimated Total Annual Burden (hours)
SSA-769	7,483	1	8	998

9. Application for Supplemental Security Income -- 20 CFR

416.305-416.335, Subpart C -- 0960-0444. SSA uses Form SSA-8001-BK to determine an applicant's eligibility for SSI and SSI payment amounts. SSA employees also collect this information during interviews with members of the public who wish to file for SSI. SSA uses the information for two purposes: (1) to formally deny SSI for nonmedical reasons when information the applicant provides results in ineligibility; or (2) to establish a disability claim, but defer the complete development of non-medical issues until SSA approves the disability. The respondents are applicants for SSI payments.

Type of Request: Revision of an OMB-approved information collection.

	Modality of Completion	Number of respondents	Frequency of response	Average burden per response (minutes)	Estimated total annual burden (hours)
	SSI Claims	802,368	1	20	267,456
1	System				
	iClaim/SSI	168,661	1	20	56,220
	Claims System				
	SSA-8001-BK	2,588	1	20	863
	(Paper Version)				
	Totals	973,617			324,539

Wage Reports and Pension Information -- 20 CFR 422.122(b) --

0960-0547. Pension plan administrators annually file plan information with the Internal Revenue Service, which then forwards the information to SSA. SSA maintains and organizes this information by plan number, plan participant's name, and Social Security number. Under Section 1131(a) of the Act, pension plan participants are entitled to request this information from SSA. The Wage Reports and Pension Information regulation, 20 CFR 422.122(b) of the Code of Federal Regulations, requires requestors submit a written request with identifying information to SSA, before SSA disseminates this information. The respondents are requestors of pension plan information.

Type of Request: Revision of an OMB-approved information collection.

Modality of	Number of	Frequency	Average	Estimated
Completion	Respondents	of Response	Burden per	Total Annual
			Response	Burden
			(minutes)	(hours)
Requests for	580	1	30	290
pension plan				
information.				

11. International Direct Deposit -- 31 CFR Part 210 -- 0960-0686. SSA's International Direct Deposit (IDD) Program allows beneficiaries living abroad to receive their payments via direct deposit to an account at a financial institution outside the United States. SSA uses Form SSA-1199-(Country) to enroll Title II beneficiaries residing abroad in IDD, and to obtain the direct deposit information for foreign accounts. Routing account number information varies slightly for each foreign country, so we use a variation of the Treasury Department's Form SF-1199A for each country. The respondents are Social Security beneficiaries residing abroad who want SSA to deposit their Title II benefit payments directly to a foreign financial institution.

Type of Request: Revision of an OMB-approved information collection.

Modality of	Number of	Frequency of	Average	Estimated
Completion	Respondents	Response	Burden Per	Total
		_	Response	Annual
			(minutes)	Burden
				(hours)
SSA-1199-	13,750	1	5	1,146
(Country)				

12. Representative Payment Policies and Administrative Procedures for Imposing Penalties for False or Misleading Statements or Withholding of Information -- 0960-0740. This information collection request comprises several regulation sections that provide additional safeguards for Social Security beneficiaries' whose representative payees receive their payment. SSA requires representative payees to notify them of any event or change in circumstances that would affect receipt of benefits or

performance of payee duties. SSA uses the information to determine continued eligibility for benefits, the amount of benefits due and if the payee is suitable to continue servicing as payee. The respondents are representative payees who receive and use benefits on behalf of Social Security beneficiaries.

Type of Collection: Revision of an OMB-approved information collection.

Regulation Section	Number of Respondents	Frequency of	Average Burden	Estimated Total
Section	Respondents	Response	Per	Annual
		response	Response	Burden
			(minutes)	(hours)
404.2035(d)	29,601	1	5	2,467
Paper/Mail	·			
404.2035(d)	562,419	1	5	46,868
Office				
interview/Intranet				
404.2035(f) -	296	1	5	25
Paper/Mail				
404.2035(f) -	5,624	1	5	469
Office				
interview/Intranet				
416.635(d) -	16,146	1	5	1,346
Paper/Mail				
416.635(d) -	296,424	1	5	24,702
Office				
interview/Intranet				
416.635(f) -	162	1	5	14
Paper/Mail				
416.635(f) -	3,067	1	5	256
Office				
interview/Intranet				
Totals	913,739			76,147

Date: January 22, 2019.

Faye I. Lipsky,

Director, Office of Regulations and Reports

Clearance,

Social Security Administration.

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